

The Providence Sunday Journal

Mental Health Crisis: There Is a Way Out

The problem of mental illness has long been one of the most perplexing confronting our community. Almost continuously since the establishment of the State Hospital for Mental Diseases, state authorities have been faced with the need for larger facilities to take care of a growing number of patients. Periodic construction of additional buildings over the years has invariably failed to catch up with the demand, providing at best only temporary relief from the ever-worsening overcrowding.

The situation has become increasingly acute in the past two decades, largely as a result of the pressure of the growing proportion of aged people. Since 1930 the number of patients at the mental hospital has jumped 75 per cent, which is more than four times the rate of increase of the state's population. And although current operating expenditures of about \$3,700,000 a year are nearly three times as large as they were 10 years ago, they are still insufficient for adequate treatment.

The steady rise in the patient load is now making imperative further expansion of the hospital's facilities. At the 1952 election the state's voters approved a \$3,000,000 bond issue to be used to erect two new buildings with a total of 460 beds. But the hospital already has 850 more patients than its normal capacity. So the construction of the two new buildings would still leave the institution overcrowded. A psychiatric consultant employed by the state has warned that between \$7,000,000 and \$8,000,000 more will have to be spent within the next dozen years for additional buildings if the influx of patients continues at the present rate.

The most dismal fact in this discouraging picture is that, under the present method of handling the problem, there is no end in sight. All we can expect is the same frustrating story of more and more patients and of an endless upward trend in capital and operating costs.

Must we resign ourselves to such a somber prospect? Is there really no way out?

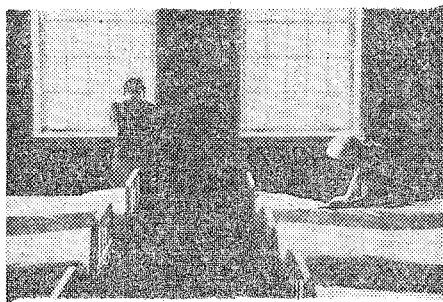
The series of articles published in these newspapers last week demonstrates conclusively, we feel, that there is a feasible alternative which is both more humane and, in the long run, more economical. The alterna-

tive is spending more money now for preventive work and for intensive treatment of the mentally ill in order to save many more tax dollars in the future.

Experience elsewhere has shown that wider application of available treatment tools can reduce the mental hospital admission rate and raise substantially the discharge rate by shortening the period of hospitalization. The pressure on the hospital can be materially relieved through the development of clinics for the detection and early treatment of mental disorders in their incipient stages. The pressure within the hospital itself can be similarly eased by providing a professional staff adequate for effective treatment, so that many patients can be discharged quickly instead of staying for years and often for the rest of their lives under what amounts to little more than custodial care.

Governor Roberts has now proposed a referendum next November on a new \$3,000,000 bond issue for the mental hospital. The money he wants the state to borrow would be used for construction of a third new building and for expansion of the power plant at Howard.

It seems to us that in proposing to sink more millions into buildings



More beds aren't the only answer.

instead of concentrating on measures to reduce the influx of patients and to speed their discharge, Mr. Roberts is ignoring the crux of the problem and taking a wrong tack in dealing with it.

Buildings in themselves cannot provide a solution. They merely treat the effect and not the underlying cause of mental hospital overcrowding. The only way to lick the problem is to concentrate on attacking its basic cause through a program which will keep down hospital

admissions and shorten the stay of those who must be hospitalized. Bricks and mortar won't do that. The only way it can be done is through an adequate psychiatric staff and a wide network of outpatient clinics serving as shock absorbers for the hospital.

This sort of attack, in the opinion of experts, does not call for any immediate large expenditures. What is needed by way of a start are steps toward strengthening the hospital's medical staff. One prominent psychiatrist has suggested that the addition of from five to 10 good doctors to the staff at a cost of no more than \$100,000 a year would be an excellent beginning and "make all the difference in the world by way of improving the quality of treatment" at the institution. Further expenditures will undoubtedly be required. But, partly because of the limited supply of psychiatrists, expansion of the staff must necessarily be a slow process.

In the statement outlining his bond issue proposal, Governor Roberts conceded that the problem "is more than just one of additional buildings" and that recruiting of competent personnel was equally vital. It is all the more difficult to understand, therefore, why he has chosen to seek the new borrowing rather than additional funds for personnel.

Aside from the need for improving the staff situation, there are other aspects of the problem to be tackled. One of them is expansion of the program for placing in nursing or foster homes patients no longer in need of full-time hospitalization. A complementary need is to explore possible other means of caring outside of the mental hospital for elderly patients who are primarily senile rather than psychotic. Equally essential are the expansion of clinic facilities and the integration of the work of public and private mental health agencies in Rhode Island. Needed, above all, is a new spirit in our approach to the overall subject of mental disease—a spirit of hope rather than defeatism, a realization that to deny good psychiatric care to those afflicted with illness of the mind is not only morally indefensible, but economically short-sighted and wasteful.